PTC/SB/06 (08-03) Approved for use through 7/31/2008, OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875									Application to Doctor Number 8		
CLAIMS AS FILED - PART   (Column 2)						SMALL	ENTITY	OR		R THAN L ENTITY	
FOR	BER FILED				RATE	T	7		T		
8ASIC FEE (37 CFR 1,18(s))					1	POLIE	FEE	1	RATE	FEE	
TOTAL CLAIMS (37 CFR 1.18(cf)	3.7	minus 20	. ].		1		-	- 02		<del>  •</del>	
(37 CFR 1.18(b))		/			┨	× 2 °		- CR	× *	<del> </del>	
7					1	<u> </u>	<del> </del>	OR	X 8	<u> </u>	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						<u> • • • • • • • • • • • • • • • • • • •</u>		OR	<u>+s</u> -		
* If the difference in octumn 1 is tass than zero, enter "O" in column 2.					•	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											
(Column 1)			(Cotumn 2)	(Column 3)	SMALL ENTITY			OR	OTHER THAN SMALL ENTITY		
	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
O COLOR 1'1800	27	Minus	32	<b>/-</b>		X 8 •		OR	X 5	FEE	
U GF OFR 1.1600	3	Minus	- Z	5.	ŀ	X 8	<u> </u>				
FIRST PRESIDITATION OF MULTIPLE DEPENDENT CLAME (37 CFR 1,18(0))							<del> </del>	OR	X 8		
(J. W. Linday)						TOTAL		OR	TOTAL		
						ADD'L FEE		OR	ADDLIFEE		
	(Column 1) CLAIMS		(Column 2)	(Column 3)							
\$ PROUP	REMAINING AFTER MENDMENT	P	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL PEE		RATE	ADDI- TIONAL EEE	
C CL CLSI (1984)	32	Minus "	:32	-/	ı	. /.x	<i>J:</i>	OR	ky	/ ===	
C (supplement)	4	Minus **	- 4	• \	ı	x s	/			/	
FIRST PRESENTATION OF MULTIPLE DEPONDENT CLAIM (37 CFR 1.18(d))						7		OR	×		
						TOTAL		OR	TOTAL /	<del></del>	
_	•••	•				ADO'L FEÉ		OR	ADDLETE [	$\rightarrow$	
	Column 1)		(Column 2)	(Column 3)	г	T					
Z A	EMAINING AFTER MENDMENT	PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
O tack ristra	232 [	Minus	32	•	Γ			OR	× 1 .		
C Independent .	Ų	Minus ***	4	•	r				X 5		
FIRST PRESENTATIO	Г			OR I	^• <u>·</u>	<del>-                                    </del>					
					7	TOTAL.			TOTAL		
# If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.											
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or restals a benefit by the public which is to fits (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suppretations for reducing this burden, should be sent to the Calef Information Officer, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 0 180 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR. X \$ INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 X S X \$ ΩR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = TOTAL \* If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL** OR CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY HIGHEST CLAIMS ⋖ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-EN **EXTRA PREVIOUSLY** TIONAL **AFTER** TIONAL AMENDMENT PAID FOR FEE FFF Minus ENDM 0 (37 CFR 1.16(c)) OR Minus Independent (37 CFR 1.16(b)) ں X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\mathbf{\omega}$ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **PREVIOUSLY FXTRA TIONAL** TIONAL **AFTER** AMENDMENT PAID FOR FEE FEE Minus Total ENDMI (37 CFR 1.16(c)) OR X \$ Independent (37 CFR 1.16(b)) Minus = X \$ OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS O PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **EXTRA PREVIOUSLY** TIONAL TIONAL **AFTER** AMENDMENT PAID FOR FEE FEE Total Minus = ENDM (37 CFR 1.16(c)) X \$ X \$ OR Independent (37 CFR 1.16(b)) Minus X \$ OR X \$ = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3" The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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